

An

Inaugural Dissertation
on Rheumatism.

Doct^r Cullen, defines Rheumatism, Pyrexia
pain about the parts, following the tract
of the muscles, attacking the knee, & larger
articulations, in preference to those of the
feet or hands, increased by external heat.
It somewhat resembles Gout, but may be
distinguished, by its attacking the large
while Gout seizes the smaller joints, it
generally comes on more gradually, it is
caused, by cold, or, something, which checks
perspiration, but the surest diagnostic, is
that it is not preceded, by symptoms of
disordered Stomach, which always give
warning of the approach of Gout.

I am disposed to think it is frequently an
hereditary disease, because I have seen
it descending from Father to Son & affecting
numerous individuals of the same family.
It is certain, that some families are much
more liable to it than others, though like
other diseases which are universally acknow-
ledged to be hereditary, it may be, & often is

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action where there is none of this congenital predisposition.

It is divided into Acute & Chronic, the first when there is pain & inflammation, the second, when there is pain without fever. Acute Rheumatism, generally attacks, the strong & robust, of middle age, but no time of life is exempt from it.

It prevails at all seasons of the year, but is most frequent in Spring & Autumn.

It has generally been considered a purely inflammatory disease, but there must be something peculiar in the action, for it very rarely terminates, in suppuration.

It is caused by exposure to cold, by wet clothes or any thing suddenly checking perspiration.

The large joints are generally the seat of the complaint, but no part of the muscular system is exempt from it, sometimes it rages some one or other of the viscera as an original disease, more frequently by metastasis from some other part.

The pains often shift from one joint, to another leaving a swelling & soreness in all the parts they have occupied.

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There is in the early stage commonly some
sweat, but it produces no alleviation of
the pain, & very rarely does any good.

The urine is scanty & high coloured, until the
disease begins to break, when often there is
a profuse discharge by the kidneys.

As this is a highly inflammatory disease
our first object in beginning the cure
is to reduce vascular action, & for this
purpose, copious & repeated venesection is
necessary. There is no substitute for the lancet.
It is customary in England to treat the disease
by Bark & Limes in general but however well
such practice may answer in that country,
it would in ours, be attended, with very bad
consequences. Sir George Doyce, is ranked
among the advocates, for this practice; he
objects to the Lancet, as giving the disease
a tendency, to a metastasis upon some
vital part, but this seems to be a groundless
apprehension.

After plentiful venesection, the bowels
should be evacuated, by Mercurial or saline
cathartics. Much purging, will not answer
for as the pain is greatly aggravated by motion.

[Faint, mostly illegible handwriting in cursive script, covering the majority of the page. The text appears to be a continuous paragraph or a series of connected thoughts.]

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The good effects from the vaccination, will be more than counterbalanced by the injury arising from getting up.

Sweating has long been, & still is, a very popular remedy, in Rheumatism. We should never attempt to excite it before, evacuations have been freely used, it will do us good, but often aggravate the disease.

Antimonial & Nitrous powders, should be employed in the first place, & when action is still further reduced, the, *Pulvis Spicatus* & *Opil. Compositus*, will often be of service. L

When once excited diaphoresis should be kept up, at least twenty four hours, or until relief is obtained, checked sooner, than this it does us good, often harm. Sweating does not always produce relief, I have seen it kept up for days without any sensible benefit. The Local affection should be attended to. Topical Bloodletting by cups or Leeches will be of great service.

A practice borrowed from the Russian Physicians has been lately introduced, of applying very cold substances to the affected part, it is universally spoken of by some, but

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seems to be rather a doubtful remedy, & is inferior to local resection.

Blisters frequently repeated will be of great benefit, it will however be best not to apply them until vascular action has been advanced.

When Rheumatism attacks any of the viscera it is to be treated, in the same way, as if the disease had originated from any other cause, only we should recur to diaphoretics earlier, in order to relieve the viscera, by determining to the surface.

When it arises upon the Bowels, Dysentery is the result, which is to be treated, as common, cases, from any other cause.

Occasionally the Heart, is affected by this disease: I think. There are a good many cases of this disease on record. It chiefly affects young persons, & is very fatal. It is marked by great anxiety & oppression, about the precordia, short cough, difficult respiration, & acute pain in the region of the Heart. The palpitation is sometimes so great, as to be audible, & to shake the Bed. It generally succeeds an attack of common

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inflammation, & when it comes on the pains
in the limbs cease. On dissection the heart
is found enlarged, & the Pericardium adher-
ing to it; the left Ventricle, is most affected.
It should be met in the onset, with Blood-
letting, followed by copious & stimulating
diaphoretics.

When there is pain in the Loins it is called
Lumbago, it often comes on suddenly while
the patient, is making some motion, & the
pain is occasionally so severe, as to induce
a fear, that some of the Vertebrae are
dislocated.

It is to be treated by copious venesection and
purging, with local bloodletting & Blisters.

Gout is a Rheumatic affection of the
Hip joint, most frequently met with in
old persons & commonly of a chronic cha-
racter. It is to be managed like similar
complaints in any other part.

Chronic Rheumatism consists, in pain
about the joints without any fever.
It is sometimes an original disease
but more frequently the consequence of
ill managed Acute Rheumatism.

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It is always connected, with an atonic state of the system, and is a tedious complaint, often very difficult to remove.

It is difficult to draw the line of distinction between the acute & chronic forms. Doctr. Bullen, characterises the chronic, by the absence of heat, coldness & stiffness of the joints, & especially, by the pain being increased by cold, & relieved by heat applied to the part.

Bloodletting is generally inadvisable, & when resorted to where there is great irritability of the vessels, instead of relieving only aggravates the complaint.

Purging is much better, it takes off the excitement from the vessels, & transfers it to the rest of the system.

There seems to be a near affinity between the Bowel complaints & Rheumatism, so striking has this appeared to some, that Richter contends that Dysentery is a Rheumatism of the Bowels. These diseases often alternate, the limbs being relieved when the Bowels are affected & vice versa. Nature therefore seems to indicate this

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as an outlet for the disease, & if a spontaneous
discharge from the bowels relieve the fever,
why may not an artificial one do the
same?

There is a vast variety of remedies used for the
cure of Chronic Rheumatism. We shall have
to name them, frequently.

Diaphoretics are much used. The common
Aether, & Dover's powder, though they may be
useful, yet, as they are apt to excite profuse
sweating, which would in a division remedy,
in the advanced stage, should be superseded
by those articles which determine gently to the
surface. The Volatile alkali, Gum Guaiacum
Terebintilla & Terebinth are very beneficial.

The two first are the best. The volatile tincture
of Guaiacum is generally employed.

Professor Chapman thinks, that, it is usually
given in doses entirely too small. He directs
as much as the stomach will bear, at night,
palliated by hot wine, & which in days
hardly fails to produce sweat & relieve the pain.
Turpentine is very useful, & is thought to be, more
universally applicable to these cases, which occur in
miasmatic countries & observe something of a

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crossed type.

The Colchicum Autumnale meadow Saffron is said to be more ephemerical, in Chronic Rheumatism, even than in Gout, & is declared by high authority to possess as much power over it, as Peruvian Bark exists in Intermitting Fever. The dose is a tea-spoonful ^{of the saturated Vinous Solution} morning & night, to be followed by a free use of diluent drinks.

Pepsigina, Rheumatism used, is much used in popular practice, & has acquired considerable reputation. The warm infusion, is an active diaphoretic, & the same preparation taken cold, is a pretty certain diuretic.

The juice of the common Pokeweed, with a little brandy, added, to preserve it, often proves useful in doses of a wine glassful three or four times a day.

Asenic has done good, Peruvian Bark is sometimes very useful.

If all these fail, we resort to Mercury, & push it to a gentle salivation, as soon as the mouth becomes affected, the disease generally yields, & so great is the power of the medicine over it, that it will sometimes recur, so

1. The first of these is the
 2. fact that the population
 3. of the world is increasing
 4. rapidly. This is due to
 5. a number of factors, including
 6. improved medical care, which
 7. has led to a decrease in
 8. mortality rates, and a
 9. corresponding increase in
 10. life expectancy.

soon as the fibrilism ceases. All the remedies I have mentioned occasionally fail.

Doctor Chapman has introduced a medicine in the management of these obstinate cases, of which he speaks in the highest terms of commendation, the *Gaium*. He has tried it in numerous cases & found it eminently beneficial. He thinks it best adapted to those in which there is great exhaustion of the system, with coldness of the extremities, the skin either dry or covered with a cold sweat, the joints stiff & swollen, & the pain greatly aggravated by change of weather.

It is his opinion that from the weakness of the circulation, the vessels are readily thrown into spasm, from ^{which} arises the pain, & that this is the case, he thinks is proved by the fact, that it never terminates in effusion of any kind. He directs 12 or 15 gr of the ^{powdered leaves} ~~of the powdered leaves~~ three or four times a day to be continued, three or four weeks, to be gradually augmented, as still some effect is manifested, sometimes three or four times the quantity will be necessary. Topical applications are beneficial - Perpetual Blisters, or what will be better caustic

The first of these is the fact that the
 country is a mountainous one, and the
 mountains are of the same height as the
 hills of the Pyrenees. The second is that
 the climate is very warm, and the soil is
 very fertile. The third is that the
 people are very industrious, and the
 country is very rich. The fourth is that
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 people are very long-lived. The fifth is
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issues near the affected joint. The use of the flesh brush, should be enjoined.

Flannel should be worn next the skin, & it will be sometimes very useful to roll the limb pretty lightly in the same -

The diet in Acute Rheumatism, should be strictly antiphlogistic. No animal food in any shape should be allowed. He should live on vegetables, his drink should be water alone or acidulated with lemon or lime juice. In the Chronic form the diet should be more generous & nutritious. Removing to a warmer climate, or travelling, when all these remedies fail has cured the disease.

I do not pretend in the foregoing essay, to have advanced any thing new, neither I hope is it expected, that I should throw any additional light on a subject which has occupied the attention & undergone the scrutiny of some of the ablest men, the science of medicine can boast. I had for a considerable time, entertained the opinion, that Rheumatism was often a hereditary disease, but should not have ventured to express it. I do not seem that, Dr Caldwell entertained similar views on

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the subject. The position I think is very tenable in theory, & certainly supported by facts. I see no reason why Rheumatism or a predisposition to it, should not depend on particular conformation, ^{as much} as any other disease, which is acknowledged to be hereditary.

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